



## UNITED STATES PATENT AND TRADEMARK OFFICE

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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bio Data Sheet

<b>SERIAL NUMBER</b> 09/099,684	<b>FILING DATE</b> 06/18/1998 <b>RULE</b> —	<b>CLASS</b> 222	<b>GROUP ART UNIT</b> 3754	<b>ATTORNEY DOCKET NO.</b> VAL0829P0012
<b>APPLICANTS</b> OLIVIER DE POUS, PARIS, FRANCE; YANNIC HERMOUET, LE PECQ, FRANCE;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A DIV OF 08/725,934 10/07/1996 PAT 5,799,810 WHICH IS A DIV OF 08/311,041 09/22/1994 PAT 5,562,219				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 1
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> DRESSLER GOLDSMITH SHORE & MILNAMOW TWO PRUDENTIAL PLAZA SUITE 4700 180 NORTH STETSON AVENUE CHICAGO, IL 60601				
<b>TITLE</b> DEVICE AND A METHOD FOR ATTACHING A DISPENSER MEMBER TO A RECEPTACLE				
<b>FILING FEE RECEIVED</b> 790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/099,684	06/18/98	215	3727	VAL0829P0012

APPLICANT

OLIVIER DE POUS, PARIS, FRANCE; YANNIC HERMOUET, LE PECQ, FRANCE.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

WJ 4/22/99

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

WJ 4/22/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FRX	SHEETS DRAWING 11	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
Verified and Acknowledged <u>WJ</u> 4/22/99 Examiner's Initials		Initials			

ADDRESS

DRESSLER GOLDSMITH SHORE & MILNAMOW  
TWO PRUDENTIAL PLAZA  
SUITE 4700  
180 NORTH STETSON AVENUE  
CHICAGO IL 60601

TITLE

~~A~~ ~~DEVICE AND A~~ METHOD FOR ATTACHING A DISPENSER MEMBER TO A RECEPTACLE

FILING FEE RECEIVED  \$790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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